## WELLS ST JOHN PS RECEIVED CENTRAL FAX CENTER

## JAN 0 9 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No	09/517,127
Filing Date	March 2, 2000
Inventor	Scott E. Moore et al.
Assignee	
Group Art Unit	3723
Examiner	T. Eley
Attorney's Docket No	MI22-1246
Title: Semiconductor Processor Systems	
Semiconductor Workpiece Process Fl	uid

Mail Stop Fee Amendment
Assistant Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

## **CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8**

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office at (571) 273-8300 on the date shown below:

- 1. Transmittal Form (PTO/SB/21) & Fee Transmittal (PTO/SB/17) in duplicate
- 2. Response to September 8, 2005 Office Action
- 3. Supplemental Information Disclosure Statement with Form PTO-1449
- 4. Request for Extension of Time (1 month)

Dated: 19/2006 By: Hatalie King

Telephone No. (509) 624-4276 Facsimile No. (509) 838-3424

NUMBER OF PAGES IN FACSIMILE: 44

PTO/SB/21 (03-03)

	U.S. Peten	t and Trademark Offi	use through 04/30/2003. OMB 0651-0031 ice; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995. In	o persons are required to respond to a collection Application Number	09/517,127	RECEIVED
TRANSMITTAL	Filing Date	March 2, 2000	GENTRAL FAX CENTER
FORM	First Named Inventor	Scott E. Moore et	t al
(to be used for all correspondence after initial fill	ing) Art Unit	3724	JAN 0 9 2006
	Examiner Name	T. Eley	
Total Number of Pages in This Submission	Attorney Docket Number	MI22-1246	
	ENCLOSURES (Check all that	t apply)	
Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts  under 37 CFR 1.52 or 1.53	Drawing(s)  Licensing-related Papers  Petition  Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer  Request for Refund  CD, Number of CD(s)	ess to Ay	ter Allowance Communication a Technology Center (TC) opeal Communication to Board Appeals and Interferences opeal Communication to TC opeal Notice, Brief, Reply Brief) reprietary Information tatus Letter ther Enclosure(s) (please entify below):
SIGNAT	URE OF APPLICANT, ATTORN	EY, OR AGEN	IT
Firm or Individual Signature  James D. Shaurette, Reg. I Wells St. John, P.S.	No. 39,833		
	RTIFICATE OF TRANSMISSION	I/MAILING	
I hereby certify that this correspondence is being fact first class mail in an envelope addressed to: Commit	simile transmitted to the USPTO or deposited v	with the United States	s Postal Service with sufficient postage as eary 9, 2006
Typed or printed Natalie King			1-1/4/-/
Signature		<del></del>	Date 1/9/06
This collection of information is required by 37 CFR	1.5. The information is required to obtain or re-	tain a benefit by the p	public which is to file (and by the USPTO to

This collection of information is required by 37 CFR 1.5. The interpretation to equire to obtain of the collection is estimated to take 12 minutes to complete, including process) an application. Confidentiality is governed by 35 U.S.Ø. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete process) and application form to the USP19. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing life burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 30231. DO NOV SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

PTO/SB/17 (12-04v2)
Approved for use through 07/31/2006, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Effectiv	e on 12/08/2	2004.		Complete if Known					
Fees pursuant to the Consolida	led Appropri	ations Act, 2005 (H.R. 48		pplication Num		/517,127	ar	C.	WED-
FEE TRANSMITTAL		<b>-</b> [F	Filing Date March 2, 2			CONTRAL FAX CENTER			
For FY 2005			First Named Inventor Scott E M			oore et al.			
		[E	xaminer Name	Т.	Eley	JAN 0 9 2006			
Applicant claims small	entity statu:	s. See 37 CFR 1.27.		rt Unit	37	24			2000
TOTAL AMOUNT OF PAYN	IENT (\$	400.00		ttomey Dockel	No. Mi	22-1246			
METHOD OF PAYMENT	(check a	I that apply)							
Check Credit C	ard	Money Order	None	Other (p	olease identi	fy):			
Deposit Account De	posit Accou	ni Number: 23-0925	<u> </u>	Deposit Ad	count Name	: Wells S	St. John, I	<u> 2.S</u>	<u> </u>
For the above-identifi	ed deposit	account, the Director	is hereb	y authorized to	: (check all	that apply	')		1
✓ Charge fee(s)	indicated b	elow		Charg				for 1	the filing f <del>ee</del>
		e(s) or underpayments			t any overp	-			
under 37 CFR WARNING: Information on this	form may b	secome public. Credit ca	ard Inform	nation should n	ot be includ	lad on this	form. Provid	e cre	dit card
information and authorization	on PTO-203	6.			_			_	
FEE CALCULATION		EVAMINATION SE	EQ						
1. BASIC FILING, SEAR	CH, AND FILING	FEES S	EARCI	H FEES	EXAMIN	NATION F	FEES		
A II - salina - Thomas		Small Entity		Small Entity Fee (\$)	Fee (\$	Small E		Fee	es Paid (\$)
Application Type Utility	300		500	250	200	100	<b>~4</b>		
Design	200		100	50	130	65			
Plant	200		300	150	160	80			
Reissue	300	100	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEE						Ea.			ntity (*)
Fee Description		Paissuss)				_	20 5 1351 1	<del>Гев</del> (	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)					00	100			
Multiple demandant claims				18	-				
Total Claims	Extra Cla			aid (\$)			tiple Deper		
95 - 20 or HP = HP = highest number of total	2		<u>\$10</u>	0.00		Fe	<u>e (\$)</u>	re	e Paid (\$)
HP = highest number of total	Extra Cla		Fee P	aid (\$)				_	
- 3 or HP =		=							
HP = highest number of indep  3. APPLICATION SIZE									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
shoots an fraction thereof. See 35 II S.C. 41(a)(1)(c) and 3 / CPK 1.10(s).									
Total Sheets	Extra Sh	<u>eets Number (</u>	ot each	accinonal SV	or traction		<u>Fee (\$)</u>	=	Fee Paid (\$)
- 100 = / 50 = (round up to a whole number) x Fees Paid (\$)									
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Supplemental IDS; Request for Extension (1 mo.) \$300.00									
	<u> </u>							_	
SUBMITTED BY	>	> =	) R	egistration No.	30 833	1-	Telephone 5	09-6	324-4276
Signature	<u> </u>		(A	ttomey/Agent)	23,000		Date 1		06
Name (Print/Type) James D.	Shaurette							щ	VV

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.